INFORMATION BULLETIN

WORKFORCE INVESTMENT ACT

Number: WIAB03-48

Date: December 23, 2003
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TO: WORKFORCE DEVELOPMENT COMMUNITY

SUBJECT: MONTHLY PARTICIPANT REPORTING REQUIREMENTS

The purpose of this information bulletin is to reiterate guidance for the reporting of monthly Workforce Investment Act (WIA) participant data. This information bulletin does not change current financial reporting requirements.

This information applies to all subgrantees in receipt of WIA grant funds. All subgrantees are required to comply with federal and State participant reporting requirements. All subgrantees must provide monthly participant information by the 20th of the month following the report period. When the reporting deadline falls on a weekend or holiday, the reports are due the last working day prior to the reporting deadline.

Subgrantees connected and using the Job Training Automation (JTA) system:

Continue to submit the Extract WIA Individual Participant Data (XWID) through the JTA system by the 20th of each month. Instructions on how to complete this process are contained in WIA Information Bulletin WIAB00-89, WIA Participant Reporting Handbook and the JTA Users Handbook.

Subgrantees not yet using the JTA system:

Complete the Interim Monthly Participant Report using Attachment 1 following the instructions in Attachment 2. By the 20th of each month, fax this report to the attention of your assigned Regional Advisor or Program Manager at (916) 654-7921.

If you have questions, please contact Jim Fitzgerald in the Performance Management Unit at (916) 654-8298.

/S/ BOB HERMSMEIER
    Chief
    Workforce Investment Division

Attachments

WORKFORCE INVESTMENT ACT
INTERIM MONTHLY PARTICIPANT REPORT SUMMARY
☐ **15 Percent**   ☐ **25 Percent**

1. Subgrantee Name and Address:	2. Subgrantee Code: _____
	3. Grant Code: _____
	4. Report Period Ending Date: _____

5. Project type: Adult ☐   Dislocated Worker ☐   Youth ☐

I. Subgrant Information			
A. Report Revision Number			
B. Subgrant Contract Number			
C. Subgrant Term:	From:		To:

II. Participant Summary	**Project Yr to Date**
A. Total Participants Registered	
B. Total Participants Exiting WIA (last quarter exits)	
1. Entered Unsubsidized Employment	
a. Training Related	
2. Employability Enhancement (Adult)	
3. Youth Enhancement	
4. Exited for Other Reasons	
III. Program Activities/Services	
A. Adult and Dislocated Workers	
1. Core Services	
2. Intensive Services	
3. Training Services	
B. Youth	
1. In School	
2. Out of School	
3. Summer Related	

IV. Comments

V. Certification					
Name:		Title:		Phone:	
Signature:				Date:	
Contact Name:		Title:		Phone:	

Fax completed report to your assigned Regional Advisor or Program Manager by the 20th of each month.

Form in MS Word

WORKFORCE INVESTMENT ACT
INTERIM MONTHLY PARTICIPANT REPORT
SUMMARY INSTRUCTIONS

1. Subgrantee Name and Address	Enter the subgrantee name and address.
2. Subgrantee Code	Enter the Job Training Automation (JTA) three-letter alpha-code assigned to each subgrantee by the Workforce Investment Division (WID).
3. Grant Code	Enter the three-digit numeric code assigned to each funding source.
4. Report Period Ending Date	Enter the ending month and year of the report period for which this report is prepared.
5. Project Type	Check the appropriate project type, Adult, Dislocated Worker or Youth. Only one project type may be checked.
I. Subgrant Information	
A. Report Revision Number	Enter the revision number of this report. If this is the initial report for the reporting period enter "00." If this report is the first revision enter "01" and so forth.
B. Subgrant Contract Number	Enter the subgrant registration number assigned by the WID. This is a seven-digit code beginning with the letter R.
C. Subgrant Term	Enter the beginning (From) and ending (To) dates for the term of the subgrant.
II. Participant Summary	
A. Total Participants Registered	Enter the total participants who have completed the intake/eligibility process and have enrolled in the program through the end of the report period.
B. Total Participants Exiting WIA (last quarter exits)	Enter the total participants who have exited the program through the last quarter. For example, for a report filed for April, May, or June 2002, the end of the last quarter would be March 31, 2002. For each of these three monthly reports, enter the number of participants who exited WIA from the beginning of your program through March 31, 2002. A report for July through September 2002 would indicate total participants exiting from the beginning of your program through June 2002. Total Participants Exiting must equal the sum of lines 1. through 4.
1. Entered Unsubsidized Employment	Enter the total number of participants exiting the program who have obtained an unsubsidized job.
a. Training Related	Enter the total number of participants in 1 above who obtained unsubsidized employment that was related to the training received.

2. Employability Enhancement (Adult)	Enter the total number of adults exiting the program that entered advanced training or postsecondary education, attained a nationally recognized degree or certificate, or state/locally recognized credential.
3. Youth Enhancement	Enter the total number of youth exiting the program that entered advanced training or postsecondary education, or obtained a general equivalency diploma (GED) or a high school diploma.
4. Exited for Other Reasons	Enter the total number of participants exiting the program for other reasons than those identified in lines 1, 2, or 3.
III. Program Activities/Services	
A. Adult and Dislocated Workers	This section of the report tallies the number of participants that received program services. Since an individual can receive more than one service, the totals in lines 1 through 3 will not add to the total participants registered. Only complete either Part A or B depending on your project type.
1. Core Services	Enter the total number of participants that received core services. If a participant received more than one core service, count only one. Core services can include, but are not limited to, the following: • Follow-up Services, Counseling • Staff Assisted Job Development • Staff Assisted Job Referrals • Staff Assisted Job Search, Placement • Staff Assisted Workshops/Job Clubs • Other Non-WIA Funded Core Services Also see WIA regulations Section 662.240 for a more complete description of core services.
2. Intensive Services	Enter the total number of participants that received intensive services. If a participant received more than one intensive service, count only one. Intensive services can include, but are not limited to, the following: • Comprehensive assessments • Development of Individual Employment Plan • Group counseling • Individual counseling and career planning • Case management • Short-term prevocational services Also see WIA Section 134(d)(3)(C) for a more complete description of intensive services.

3. Training Services	Enter the total number of participants that received training services. If a participant received more than one training service, count only one. Training services can include, but are not limited to, the following: • Adult education • Customized training • Entrepreneurial training • Job readiness training • Occupational skills training • On the job training • Private sector training • Skill upgrading and retraining • Workplace training and cooperative education programs Also see WIA Section 134(d)(4)(D) for a more complete description of training services.
B. Youth	This section of the report tallies the number of youth participants that received program services. The totals in lines 1 and 2 must add to the total youth participants registered.
1. In School	Enter the number of in school youth that received services under your youth program
2. Out of School	Enter the number of out of school youth that received services under your youth program.
3. Summer Related	Enter the number of youth that received summer related youth program services.
IV. Comments	
Comments	Enter any comments necessary to explain discrepancies or clarify items in the report.
V. Certification	
Name	Enter the name of the authorized individual who will be signing the form.
Title	Enter the authorized individual's title.
Phone	Enter the authorized individual's phone number.
Signature	The authorized official must sign the form. The signature certifies that the form has been accurately completed, with the valid data and in compliance with the WIA program.
Date	Enter the date the report is submitted.
Contact Name	Enter the name of a contact person in the event any questions should arise concerning information on the report.
Title	Enter the contact person's title.
Phone	Enter the contact person's phone number.